

## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION 10

1200 Sixth Avenue, Suite 900 Seattle, WA 98101-3140

OFFICE OF ENVIRONMENTAL CLEANUP

## CONSENT FOR ACCESS TO PROPERTY

Property Owner:

Calvin Miller / Vicky Nickolich.

319 Gambell Street Anchorage, AK 99501

Property Description:

319 Gambell Street, Anchorage, AK 99501

parcel Number 002-093-39-000

720 3<sup>rd</sup> Avenue, Anchorage, AK 99501

parcel Number 002-093-38-000

I, the undersigned, am the owner, their representative, or otherwise control the property at the location described above. The U.S. Environmental Protection Agency has requested entry and access pursuant to its response and enforcement responsibilities under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or Superfund) as amended, 42 U.S.C 9601 et seq.

I hereby give my consent to employees, authorized representatives, and persons acting at the request of the EPA to enter and have access to the property site located at the above address.

Access is granted to complete those tasks required for the CERCLA site assessment of the 4<sup>th</sup> and Gamble Parking Lot Site, which may include but are not limited to the following:

- 1. The construction of temporary monitoring wells,;
- 2. The taking of such soil, water, indoor and out door air, and soil gas samples as may be determined to be necessary;
- 3. The proper abandonment of any temporary well(s) constructed as may be determined to be necessary;
- 4. Other actions (e.g., the staking of subsurface utility locations, surveying, etc) related to the investigation of surface and subsurface contamination; and
- 5. Take photographs of the property as may be determined to be necessary.

This written permission is given to me voluntarily with knowledge of my right to refuse and without threats or promises of any kind.

Name and title (please print)

 Date

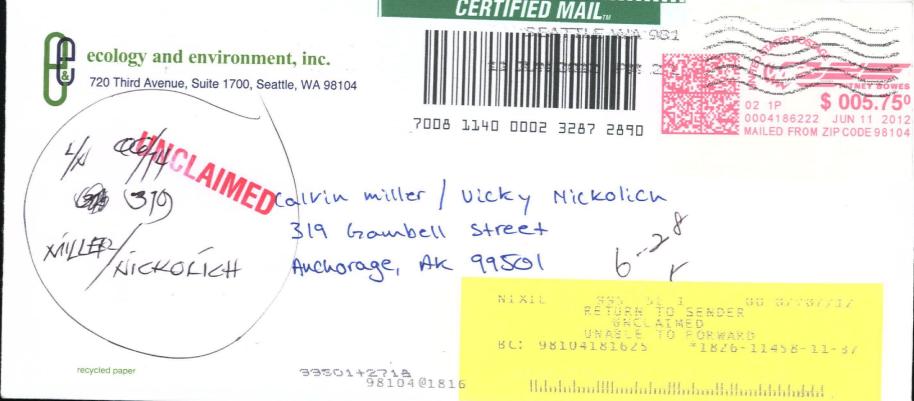
Signature



January Co. California



Person EP	PA should co	ontact:			
Name: _	<del>-</del>				
Phone: _				 	
Address:				 	
			·	 	_



1	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY				
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>Calvin miller vicky Rickelich</li> </ul>	A. Signature    Agent   Addressee     Addressee     B. Received by (Printed Name)   C. Date of Delivery   D. Is delivery address different from item 1?   Yes     If YES, enter delivery address below:   No				
	319 Gambell Street Anchorage, AK 99501	3. Service Type Certified Mail Registered Insured Mail C.O.D.				
		4. Restricted Delivery? (Extra Fee) ☐ Yes				
	2. Article Number 7008	1140 0002 3287 2890				
	(Transfer from service label)	400505 00 M-154				
	PS Form 3811, February 2004 Domestic Return Receipt					

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